SUBSTANCE ABUSE OFTEN CO-EXISTS WITH AN UNDIAGNOSED ILLNESS

Jim is a successful attorney who also is struggling with alcoholism. In spite of his addiction, he has thrived in his practice and has learned to cope with the consequences of his drinking: a failing marriage, poor health, and little sleep. Jim has been in treatment a few times and has maintained sobriety for a while, but he relapsed when depressed, stressed, or anxious. Jim convinces his family, friends, and colleagues that he is managing, but in reality he has given up hope for sobriety. What Jim does not know is that he may also be suffering from depression. Left untreated, this could pose a barrier to his long-term recovery.

A Common Situation

Jim represents an estimated 40 to 60 percent of adults with an alcohol or drug problem who also suffer from a co-occurring mental health disorder in their lifetime. As with medical disorders, mental health disorders and addictions must be treated in order to attain health. Just as high blood pressure and heart disease can affect each other, so can a mental health issue affect recovery.

The nature of an attorney's success and ability to solve problems, conquer challenges, and thrive in stressful situations often makes it difficult to embrace and engage in treatment. The following are some of the traits that can inhibit lawyers from seeking or engaging in treatment for co-existing disorders.

I can handle it myself.

Attorneys who on a daily basis may handle multiple critical problems simply may believe they can figure out a way to handle their own problems. When people are depressed or anxious, they usually look for a way to feel better, often by self-medicating with alcohol, drugs, or other addictive behavior. After using, they are likely to feel more depressed or anxious, leading to a dangerous cycle in which they feel stuck.

I expect results.

Attorneys by their very nature may expect that if they enter into treatment, get counseling for their addiction, and attend meetings, they should be sober. A co-existing disorder such as depression may sabotage sobriety regardless of the strength of the recovery program.

What will others think?

For many attorneys, embracing the concept that they are suffering from the disease of addiction as well as depression or anxiety is simply too much stigma. The perceived stigma may lead them to attempt to minimize their problems and avoid treatment.

I want to feel better today.

Successful attorneys aim for results and outcomes. Sometimes these men and women avoid entering treatment because they perceive treatment may not produce results fast enough. Various studies on co-occurring disorders illustrate the importance of ongoing integrated care for substance abuse and the mental health disorder that does not stop at 30 days. The need for a quick fix may, in fact, make it difficult to enter or engage in treatment.

I can't let go of my responsibilities.

Attorneys with multiple responsibilities may struggle with leaving their cell phone, Blackberry, and laptop at the door of a treatment center. However, having their “tools of the trade” in treatment can prevent them from focusing on getting healthier and on the road to recovery.

I feel terrible when I stop using and can't function.

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When people are self-medicating and stop, they suffer from the physical and mental consequences of substance abuse. When attorneys with multiple responsibilities need a drink, drug, or other addiction to get through the day, the withdrawal symptoms may be too great to remain sober. They balance the need to get the job done with risking their physical and emotional health.

I am in control.

Letting go of control is difficult for most people, but it’s a particular challenge for high-functioning professionals such as attorneys. When people are in treatment, they need to let go of control and embrace their disease and the process of recovery from co-occurring disorders.

Recognizing the special challenges facing attorneys is the first step in assisting these successful individuals with taking steps to address their co-existing disorders. Assisting lawyers in recovery depends on:

- A thorough evaluation of mental health disorders, addictions, and medical problems.
- Education about co-existing disorders.
- Development of a plan to handle responsibilities when the lawyer is in treatment.
- Validation of concerns and encouragement to express frustrations.
- Referral to a program that integrates treatment for co-existing disorders and understands the unique challenges facing professionals such as attorneys.

Most importantly, any person suffering from the diseases of addiction and a co-existing disorder should know that there is hope to feel better. The OAAP can help. Call and ask to speak to one of the attorney counselors today at 503-226-1057 or 1-800-321-6227. It’s free. It’s confidential. It works.

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This article originally appeared as “Recognizing Substance Abuse Often Co-exists with an Undiagnosed Illness May Hold the Key to Recovery,” by John O’Neill, in the Summer 2006 issue of Highlights, published by the American Bar Association Commission on Lawyer Assistance Programs. Reprinted with permission. John O’Neill is the former director of the Menninger Clinic Professionals in Crisis Program.